U.S. DISTRICT COURT N.D. OF ALABAMA



Pro Se 14 (Rev. 09/16) Complaint for Violation of Civil Rights (Prisoner)

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF ALABAMA

(Write your full name. No more than one plaintiff may be named in a complaint.)

-v-

(to be filled in by the Clerk's Office,

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all of the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here. Your complaint may be brought in this court only if one or more of the named defendants is located within this district.)

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee of \$400.00 or an Application to Proceed In Forma Pauperis.

Mail the original complaint and the filing fee of \$400.00 or an Application to Proceed In Forma Pauperis to the Clerk of the United States District Court for the Northern District of Alabama, Room 140, Hugo L. Black U.S. Courthouse, 1729 5th Avenue North, Birmingham, Alabama 35203-2195.

I. The Parties to this Complaint

~*	The Tarties to this Complaint	•		
Α.	The Plaintiff			
	Provide the information below	for the plaintiff named in the con	nplaint.	
	Name All other names by which you have been known: ID Number Current Institution Address	Angela Suf OG766-025 Federal Corre P.O.BX 4000 Aliceville	5 GLPS	Stitution 35442 Zip Code
В.	The Defendant(s)			
• <u>.</u>	below are identical to those cor person's job or title (if known) a	for each defendant named in the y, an organization, or a corporatination in the above caption. For and check whether you are bringing apacity, or both. Attach additions	on. Make sure that an individual defer ng this complaint a	the defendant(s) listed dant, include the
	Defendant No. 1	- d - A	,	
	Name	F.C.I. A	nceville	
	Job or Title (if known) Shield Number	Medical	000	
	Employer Address	_		
		Alceville	AL State	SH4J Zip Code
		☐ Individual Capacity	☑ Official Ca	pacity
	Defendant No. 2			
	Name			
	Job or Title <i>(if known)</i> Shield Number			
	Employer			
	Address			
		City	State	Zip Code

☐ Individual Capacity

Official Capacity

	Name	•				
	Job or Title (if known)					
	Shield Number Employer	***************************************		**************************************		
	Address					
•	1441033	***************************************				
		**	City		State	Zip Code
			Individual Capacity		Official Capacity	•
efer	idant No. 4				1	
1	Name					
J	ob or Title (if known)					
5	Shield Number					
I	Employer					
A	Address					
			Cit			
		_	City		State	Zip Code
		L	Individual Capacity		Official Capacity	
Bas	sis for Jurisdiction					
Nai	der 42 U.S.C. § 1983, you m vileges, or immunities secure med Agents of Federal Bured violation of certain constitut	a by ti au of N	ne Constitution and [federarcotics, 403 H.S. 388 (aral lass	I II Tindon Diversi	C YTT
me						
A.	Are you bringing suit again	nst <i>(ch</i>	eck all that apply):			
	Are you bringing suit again	<i>ivens</i> c	laim)			

n.

	C.	Plaintiffs suing under <i>Bivens</i> may only recover for violation of certain constitutional rights. If you are suing under <i>Bivens</i> , what constitutional right(s) do you claim is/are being violated by federal officials?
	D.	Section 1002 allowed for the control of the control
	<i>D</i> .	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.
m.	D.:	
111.		soner Status
	Indi	icate whether you are a prisoner or other confined person as follows (check all that apply):
		Pretrial Detainee
		Civilly committed detainee
		Immigration detainee
		Convicted and sentenced state prisoner
	<u></u>	Convicted and sentenced federal prisoner
		Other(explain)
IV.	Stat	tement of Claim
	in u incl clair	e as briefly as possible the facts of your case. Describe how each defendant was personally involved ne alleged wrongful action, along with the dates and locations of all relevant events. You may wish to ude further details such as the names of other persons involved in the events giving rise to your ms. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write ort and plain statement of each claim in a separate paragraph. Attach additional pages if needed.
	A.	If the events giving rise to your claim arose outside an institution, describe where and when they arose.
	-	
	В.	If the events giving rise to your claim arose in an institution, describe where and when they arose. Aliceville Ali F.C. I. OCT 15, 2018

C. What date and approximate time did the events giving rise to your claim(s) occur? OCT 15, 2018
D. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?) Was Being Processed into the FCI. Did have two
To Process les Stock us in sho while I wis handows from behind (me telling thom I wasn't feeling well) I v. Injuries Hada Seizure. Couldn't move my RIGHT ARM
If you sustained injuries related to the events alleged above, describe your injuries in detail. In MAY of 2019 Finally Seen Spealist-and Nick owned but that I have a virtaines in lover nock mussed up-along with tear in votary 3 nerve damage-vi. Relief 60 Home in Dec. They cant + wont fix it.
State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.
I have laid in pain where PA's have have moved my arm (now I we been told they should
Told I should not have been given. Wis given a
Shot in my showar by a doctor who had haver guen one - that and nothing - (But he pulled the
Chre wrong SEIZUVE mids 2xs sinding me to Hospital. My Kight Shoulder (Im Right hampled)
is Distigured. I RAISE dos a home and have a hand cap son- Im 51. I wis Running 4 miles
aday when I got here. Im asking Inillion. for damages a medical. Min a suffering.

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	Yes
	□ No
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
B.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes
	□ No
	☐ Do not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
	Yes
	□ No
	□ Do not know
	If yes, which claim(s)?

Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?
Yes
□ No
If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?
□ Yes
□ No .
If you did file a grievance:
1. Where did you file the grievance? (a) Alceville Hrew Counston
2. What did you claim in your grievance? 8 1/2 - 4 9 Malloal
3. What was the result, if any? I was Told I might of lost anything troopt
4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)
Ohl wis told to Reduce of I did Then wis told themes get lost Here. So I wrote from all. World To A herese heard Back After to 20 days a syr- ady died here B/C of medical- Room Still Mas yellow o tape up

F.	Ify	If you did not file a grievance:						
	1.	If there are any reasons why you did not file a grievance, state them here:						
-	2.	If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:						
G.	Ple	ase set forth any additional information that is relevant to the exhaustion of your administrative nedies.						
	(No	nte: You may attach as exhibits to this complaint any documents related to the exhaustion of you ninistrative remedies.)						
Pre	vious	s Lawsuits						
in a	ng u ny fa inds	see strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained cility, brought an action or appeal in a court of the United States that was dismissed on the that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless ner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).						
To to mal	he boiciou Yes	est of your knowledge, have you had any cases dismissed based on grounds that it was frivolous s, or failed to state a claim upon which relief may be granted?						
	No							
If ye	es, sta ible.	ate which court dismissed your case(s), when this occurred, and attach a copy of the order(s) if						
•								
								

VIII.

A.	Hav acti	ve you filed other lawsuits in state or federal court dealing with the same facts involved in this ion?
		Yes
	Q.	No
B.	inei	our answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If re is more than one lawsuit, describe the additional lawsuits on another page, using the same mat.)
	1.	Parties to the previous lawsuit
		Plaintiff(s)
		Defendant(s)
	2.	Court (if federal court, name the district; if state court, name the county and State)
	3.	Docket or index number
	4.	Name of Judge assigned to your case
	5.	Approximate date of filing lawsuit
	6.	Is the case still pending?
		☐ Yes
		□ No
	If no	o, give the approximate date of disposition.
	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?

IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Printed Name of Plaintiff

Prison Identification #

Prison Address

Angela Gipson

(110 AL)
State

Zip Code

I declare under penalty of perjury that the foregoing is true and correct.

Executed: on

Signature of Plaintiff